10696849 10/27/2006 WABDELR1 00000073 031952 120.00 DA

Approved for use through 7/31/2006. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Act of 1995, no persons are required to respond to a collection of information unless if displays a valid OMB control number.

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)			Docket Number (Optional) 259052003700	
FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)			2590	
Application Number 10/696,849		Filed O	Filed October 29, 2003	
For OPTICAL PICKUP DEVICE AND METHOD AND APPARATUS FOR ASSEMBLING THE SAME				
Art Unit 2633			Examiner	T. Alunkal
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.				
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):				
X One mo	onth (37 CFR 1.17(a)(1))	<u>Fee</u> \$120	Small Entity Fee \$60	\$ 120.00
Two mo	onths (37 CFR 1.17(a)(2))	\$450	\$225	\$
Three n	nonths (37 CFR 1.17(a)(3))	\$1020	\$510	\$
Four months (37 CFR 1.17(a)(4))		\$1590	\$795	\$
Five months (37 CFR 1.17(a)(5))		\$2160	\$1080	\$
Applicant claims small entity status. See 37 CFR 1.27.				
A check in the amount of the fee is enclosed.				
Payment by credit card. Form PTO-2038 is attached.				
The Director has already been authorized to charge fees in this application to a Deposit Account.				
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 03-1952 Lhave enclosed a duplicate copy of this sheet. Fee Transmittal form (PTO/SB/17) is attached to this submission in duplicate.				
I am the applicant/inventor.				
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).				
attorney or agent of record. Registration Number				
x attorney or agent under 37 CFR 1.34.				
Registration number if acting under 37 CFR 1.34			33,003	<u> </u>
Signature			October 24, 2006 Date	
Norman R. Klivans			(650) 813-5850	
Typed or printed name			Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.				
X Total of 1 forms are submitted.				

Client Ref.: SP4301US/TA